

# BEST AVAILABLE COPY

<b>SERIAL NUMBER</b> 09/232,880	<b>FILING DATE</b> 01/15/99	<b>CLASS</b> 514	<b>GROUP ART UNIT</b> 1635 1643	<b>ATTORNEY DOCKET NO.</b> 210121.428C6
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APPLICANT

JIANGCHUN XU, BELLEVUE, WA; DAVIN C. DILLON, REDMOND, WA; JENNIFER LYNN MITCHAM, REDMOND, WA.

**\*\*CONTINUING DOMESTIC DATA\*\*\*\*\***

VERIFIED THIS APPLN IS A CIP OF 09/159,822 09/23/98  
 WHICH IS A CIP OF 09/116,134 07/14/98  
 WHICH IS A CIP OF 09/030,606 02/25/98  
 WHICH IS A CIP OF 09/020,747 02/09/98  
 WHICH IS A CIP OF 08/904,809 08/01/97  
 WHICH IS A CIP OF 08/806,596 02/25/97 ABN

**\*\*371 (NAT'L STAGE) DATA\*\*\*\*\***

VERIFIED

NONE  
amb

**\*\*FOREIGN APPLICATIONS\*\*\*\*\***

VERIFIED

NONE  
amb

IF REQUIRED, FOREIGN FILING LICENSE GRANTED 02/05/99

Foreign Priority claimed 35 USC 119 (a-d) conditions met	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Met after Allowance	<b>STATE OR COUNTRY</b> WA	<b>SHEETS DRAWING</b> 6	<b>TOTAL CLAIMS</b> 29	<b>INDEPENDENT CLAIMS</b> 8
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ADDRESS

DAVID J MAKI  
 SEED AND BERRY  
 6300 COLUMBIA CENTER  
 701 FIFTH AVENUE  
 SEATTLE WA 98104-7092

  

TITLE

COMPOUNDS FOR IMMUNODIAGNOSIS OF PROSTATE CANCER AND METHODS FOR THEIR USE

  

<b>FILING FEE RECEIVED</b>  \$1,858	<b>FEES: Authority has been given in Paper</b> No. _____ to charge/credit DEPOSIT ACCOUNT NO. _____ for the following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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